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REPORT
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INJURY PREVENTION ACT OF 1986

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Mr. HATCH, from the Committee on Labor and Human Resources, submitted the following

REPORT

[To accompany S. 2648]

The Committee on Labor and Human Resources, to which was referred the bill (S. 2648) to improve the public health through the prevention of injuries, having considered the same, reports favorably thereon with amendments, and an amendment to the title, and recommends that the bill as amended do pass.

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I. BILL SUMMARY

The Injury Prevention Act of 1986 authorizes federal efforts at injury control based on the finding that injury is a major public health problem in the United States which caused over 140,000 fatalities last year. The purposes of the act are to promote research into injury control, to promote cooperation between researchers in

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different disciplines in conducting this research, and to promote coordination between states and the federal government in order to reduce the national toll of injury. It is also intended to focus specific attention on the problem of injuries to children.

The bill amends Title III of the Public Service Act by adding a new part titled "Part J—Injury Control." The Secretary of HHS is directed to provide grants for research on injuries to individuals in a variety of relevant disciplines (epidemiology, engineering, biomechanics, rehabilitation, etc.) and to promote efforts at injury control at the state and local levels. The Secretary is also directed to report to Congress on the causes of injuries to children and to recommend approaches to reduce the current incidence of childhood injury.

II. Background and Need

Injury is a major public health problem in the United States. It causes the deaths of more than 140,000 Americans and permanently disables tens of thousands more each year. Injury is the fourth leading cause of death in the U.S. behind heart disease, cancer and stroke. However, more Americans below the age of 45 die from injuries than from any other cause, and more individuals between the ages of 15 and 24 die from injuries than all diseases combined. Among the elderly the fatality rate (the number of deaths due to injury per 100,000 of population) from injury is higher than among younger individuals.

The economic impact of injuries is significant. Indirect and direct costs together are estimated to be between $75 and $100 billion annually. In addition, injuries are responsible for the largest number of Years of Potential Life Lost (YPLL). YPLL is an index used by the Centers for Disease Control to estimate the impact of potentially preventable deaths occurring early in life.

The National Research Council published a report on injury in 1966, entitled, "Accidental Death and Disability: The Neglected Disease of Modern Society." This report documented the seriousness of injuries in America and recommended that research and manpower support be provided in this area. However, injury control has received relatively low support when compared with funding of cancer, heart disease and other major health problems. Though injury is a major health problem today in America, only two cents of every Federal health research dollar is spent on injury control.

In 1983, Congress directed the Secretary of Transportation through the National Academy of Sciences (of the National Research Council) to determine what is known about injury; what research should be done to learn more; and what arrangements the Federal Government could use to increase and improve the knowledge of injury. In response, the National Research Council (NRC) and the Institute of Medicine (also of NRC) established a Committee on Trauma to examine the public health problem of injury. The results of the committee's study was published in 1985 in a report entitled "Injury in America." The Committee on Trauma reported that "injury is the principal public health problem in America

today," and that the time has come for the United States to address this problem.

To assist in addressing the problem of injury in America, the Committee recommended that an ongoing Federal research program called a Center for Injury Control be established within the Centers for Disease Control. The proposed center would coordinate and assist the implementation of injury control activities (including research, surveillance systems, education and training in the areas of treatment, prevention and rehabilitation).

Congress appropriated $10 million for fiscal year 1986 to the Department of Transportation through the Centers for Disease Control to implement the recommendations made by the National Research Council report on "Injury in America."

S. 2648—Injury Prevention Act of 1986—authorizes continued appropriations for fiscal years 1988, 1989 and 1990 and sets forth guidelines for implementing a Federal program in injury control.

III. History of Legislation

The Committee has a long-standing interest in and concern for the problems involved in accident prevention. This program, while never authorized, was created through appropriations in 1986. It has always been the intent of Congress that the appropriate oversight Committees would pass authorizing legislation.

The Committee considered S. 2648 in executive session on August 6, 1986, and agreed to report it favorably to the Senate.

IV. Text of the Bill

A BILL To improve the public health through the prevention of childhood injuries

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled, That this Act may be cited as the [Child Injury] *"Injury Prevention Act of 1986".*

FINDINGS AND PURPOSES

SEC. 2. (a) The Congress finds and declares that:

(1) Injury is one of the principal public health problems in America, and causes over 140,000 deaths per year.

(2) Injury rates are particularly high for [children] *children and the elderly.*

(3) Injury causes 50 percent of all deaths for children over the age of one year and two-thirds of all deaths for children over the age of 15 [years] *years, and is the leading cause of death for individuals under the age of 44 years. Individuals over the age of 65 years have the highest fatality rates for many injuries.*

[(4) Injuries resulting from consumer products are a particularly serious problem. In 1985, over 5,000,000 children suffered injuries resulting from consumer products which were serious enough to require visits to hospital emergency rooms.]

[(5)] *(4)* Injury control has not been given high priority in the United States, and the research being conducted on injury control and the number of personnel involved in injury control activities are not adequate.

(b) The purposes of this Act are—

(1) to promote research into the casues, [mechanics,] diagnosis, treatment, prevention, and control of injuries and rehabilitation from injuries;

(2) to promote cooperation between specialists in fields involved in injury research; and

(3) to promote coordination between Federal, State, and local governments and public and private entities in order to achieve a reduction in deaths from injuries.

PUBLIC HEALTH RESEARCH AND ACTIVITIES RELATING TO INJURY CONTROL

SEC. [2.] *3.* Title III of the Public Health Service Act is amended by adding at the end thereof the following new part:

"PART J—INJURY CONTROL

"RESEARCH

"SEC. 391. (a) The Secretary, through the Director of the Centers for Disease Control, shall—

"(1) conduct, and give assistance to public and nonprofit private entities, scientific institutions, and individuals engaged in the conduct of, research relating to the causes, mechanisms, prevention, diagnosis, teatment of infuries, and rehabilitation from injuries; and

"(2) make grants to public and nonprofit private entities (including academic institutions, hospitals, and laboratories) and individuals for the conduct of such research.

"(b) The Secretary, through the Director of the Centers for Disease Control, shall collect and disseminate, through publications and other appropriate means, information concerning the practical applications of research conducted or assisted under subsection (a).

"CONTROL ACTIVITIES

"SEC. 392. (a) The Secretary, through the Director of the Centers for Disease Control, shall—

"(1) assist States and political subdivisions of States in activities for the prevention of injuries; and

"(2) encourage regional activities between States designed to reduce injury rates.

"(b) The Secretary, through the Director of the Centers for Disease Control, may—

"(1) enter into agreements between the Service and public and private community health agencies which provide for cooperative planning of activities to deal with problems relating to injuries and injury control; and

"(2) work in cooperation with Federal, State, and local agencies to promote injury control.

"STUDY

"SEC. 393. By January 1, [1988,] *1989,* the Secretary, through the Director of the Centers for Disease Control, shall prepare and

transmit to the Congress a report analyzing the incidence and causes of childhood injuries in the United States and containing recommendations for such legislation with respect to injury control as the Secretary considers appropriate.

"AUTHORIZATIONS OF APPROPRIATIONS

"SEC. 394. (a) To carry our [section 391,] *sections 391 and 392,* there are authorized to be appropriated [$5,000,000] *$10,000,000* for each of the fiscal years [1987,] 1988, [and 1989,] *1989, and 1990.* Of the amounts appropriated under this [subsection] *section* for any fiscal year, not more than 20 percent may be used for Federal administrative expenses to carry out such section for such fiscal [year.] *year.".*

["(b) To carry our section 392, there are authorized to be appropriated $5,000,000 for each of the fiscal years 1987, 1988, and 1989, of the amounts appropriated to under this subsection for any fiscal year, not more than 20 percent may be used for Federal administrative expenses to carry out such section for such fiscal year.".]

Amend the title so as to read: "A bill to improve the public health through the prevention of injuries.".

V. COMMITTEE VIEWS

The Committee is aware that injuries kill more Americans aged 1-34 than all diseases combined and accidents are the leading cause of deaths for individuals up to age 44. Injury is the fourth leading cause of mortality for individuals of all ages and a leading cause of disability. There are more than 80,000 people who develop new and permanent disabilities annually because of injuries to the brain or spinal cord.

The Committee accepts the conclusion of the National Research Council and the Institute of Medicine in their 1985 report, *Injury in America,* that injury is not an insoluble problem. Progress in solving this problem is impeded by the popular view that injuries are accidents which are largely the result of faulty behavior or random occurrences; therefore, are not amenable to successful efforts at control. The Committee believes that with the proper effort, considerable progress can be made in this area. Efforts to understand the causes of injuries, prevent their occurrence, and diminish their impact will only succeed if these goals are made priorities.

The Committee recognizes that, in the past, injury was not a major research or public health priority. No federal agency was designated as a lead agency for this important health problem. The dollars spent on injury research and control were meager. The Committee seeks to make injury a public health priority by amending the Public Health Service Act and authorizing a Center for Injury Control as a standing feature of the Public Health Service within the Center for Disease Control.

The Committee recognizes that solving the problem of injuries will require the activity of individuals with expertise in varied fields including: epidemiology, engineering, biomechanics, prevention, medical treatment, and rehabilitation. It will require significant research in this area. It will also require coordinated public

health efforts at the federal, state, and local level to focus attention on the problem and translate the benefits of research into meaningful public health programs to reduce the toll of injury.

The authorization of a Center for Injury Control within the Center for Disease Control is expected to provide a focus on injuries at the federal level and to stimulate a research effort that will elicit a response from researchers in the relevant disciplines. The Center is expected to support and coordinate that research effort. The Center is also expected to stimulate efforts at the federal and state level to control and prevent injuries. Since the CDC is the principal agency with responsibility for federal-state cooperation in addressing public health problems, it is anticipated that over several years injury control will become a priority area for such cooperation.

The initial authorization level for the Center contained in this legislation is modest. An appropriation for the same amount is already being distributed for the 1986 fiscal year and is under consideration for 1987. Therefore, the authorization contained in this legislation would not go into effect until 1988.

It is recognized that the New Center directors may find it difficult to address the full agenda described in this bill in a single year or two. The Committee wishes to confer on the new Center's director(s) discretion to implement this program as they feel is appropriate in the ensuing years.

With this bill, the Committee also makes special note of the problem of injuries to children and adolescents. Two-thirds of all deaths of children over the age of 15 are due to injuries. Half of all deaths of children age 1 to 15 are due to injuries.

Expanded efforts are already underway to focus increased attention on this important area of children's health. Earlier this year, the nation celebrated Children's Accidents Prevention Week for the first time. Several new public service announcements addressing injuries to children were released by the Department of Health and Human Services during that week for television broadcast.

The Committee wishes to increase the attention given to the problem of injuries to children. This legislation mandates a report on this topic. The report should describe the scope of the problem and include recommendations toward a solution. Such recommendations should focus on the research agenda as well as suggestions for federal and state agendas to address this problem. Recommendations regarding a research program and control efforts should acknowledge with activity at the new Center and lay the foundation for further development of the Center's activities. Recommendations for legislation at the federal and state level are also expected to be contained in the report.

VI. Votes in Committee

S. 2648 was unanimously passed by the Labor and Human Resources Committee and reported favorably.

VII. Cost Estimate

U.S. Congress,
Congressional Budget Office,
Washington, DC, August 13, 1986.

Hon. Orrin G. Hatch,
Chairman, Committee on Labor and Human Resources, U.S. Senate, Washington, DC.

Dear Mr. Chairman: The Congressional Budget Office has prepared the attached cost estimate for S. 2648, the Injury Prevention Act of 1986, as ordered reported by the Senate Committee on Labor and Human Resources on August 6, 1986.

If you wish further details on this estimate, we will be pleased to provide them.

With best wishes,
Sincerely.

Rudolph G. Penner, *Director.*

CONGRESSIONAL BUDGET OFFICE COST ESTIMATE

1. Bill number: S. 2648.
2. Bill title: Injury Prevention Act of 1986.
3. Bill status: As ordered reported by the Senate Committee on Labor and Human Resources on August 6, 1986.
4. Bill purpose: To improve the public health through the prevention of injuries.
5. Estimated cost to the Federal Government:

[By fiscal year, in millions of dollars]

	1987	1988	1989	1990	1991
Estimated Authorization Level		10	10	10	
Estimated Outlays		6	9	10	4

The costs of this bill fall within budget function 550.

Basis of Estimate: An authorization level for all portions of the bill except the study is stated in the bill. We assume authorized amounts are fully appropriated at the beginning of each fiscal year. Outlays are estimated using spendout rates computed by CBO on the basis of similar health services program data.

No stated authorization appears in the bill for a study on the incidence and causes of childhood injuries, to be completed by January 1, 1989. The study would most likely be conducted by the Division of Injury Epidemiology and Control within the Centers for Disease Control (CDC). According to CDC, the research and control activities provided for in the bill would give them enough information to complete the required study at no additional cost to the federal government.

6. Estimated cost to State and local government: The budgets of state and local governments would not be directly affected as a result of enactment of this legislation.
7. Estimate comparison: None.
8. Previous CBO estimate: None.

9. Estimate prepared by: Carmela Dyer.
10. Estimate approved by James L. Blum, Assistant Director for Budget Analysis.

VIII. Regulatory Impact Statement

The Committee has determined that there will be a minimal amount of regulatory burden and paperwork. Activities of the Center for Injury Control are currently conducted within the Centers for Disease Control, and those activities will continue without a need for increased regulation.

IX. Family Fairness Statement

The Committee believes this legislation will have a beneficial impact on families as a result of improvements in the nation's health and the health of individuals. The current human toll of death and disability from injury which falls disproportionately on the young represents countless family tragedies. The working years of life lost, and the financial strain caused by the injury problem is also a heavy burden to families throughout the country.

The focus on injury which will be expanded through the Center authorized here should contribute to an acceleration of efforts around the country to make injury an important health priority. Over the long term, the reduction in injury rates, the diminution of the physical impact of injuries, and the improvements in treatment and rehabilitation which are expected to result from the establishment of injury as a health priority will be of significant and lasting benefit to families.

X. Section-by-Section Analysis

S. 2648—Injury Prevention Act of 1986—A Bill to Improve the Public Health Through the Prevention of Injuries

Section 1 of the bill cites the Act as the "Injury Prevention Act of 1986."

Section 2 (parts (a) and (b)) sets forth the findings of Congress and the purposes of the act. Injury was found to be a major public health problem in the United States, particularly among children and the elderly. The purposes of this act are to promote research into injury control, to promote cooperation between research specialists, and to promote coordination between private and public entities in the area of injury control.

Section 3 sets forth to amend Title III of the Public Health Service Act by adding a new part entitled "Part J—Injury Control."

Section 391 of part J directs the Secretary through the Director of the Centers for Disease Control to conduct, assist and provide grants for research in the area of injury control, and to disseminate the practical findings of the research.

Section 392 of part J directs the Secretary through the director of centers for Disease Control to promote and assist in injury control activities carried out at local, state and regional levels.

Section 393 of part J directs the Secretary through the Director of Centers for Disease Control to report, by January 1989, the inci-

dence and causes of childhood injuries in the United States and recommended injury control legislation.

Section 394 of part J authorizes the appropriation of $10,000,000 for each of the fiscal years 1988, 1989 and 1990 for research and coordination activities relating to injury control.

XI. Changes in Existing Law

In compliance with rule XXVI paragraph 12 of the Standing Rules of the Senate, the following provides a print of the statute or the part or section thereof to be amended, or replaced (existing law proposed to be omitted is enclosed in black brackets, new matter is printed in italic, existing law in which no change is proposed is shown in roman):

Public Health Service Act

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TITLE III—GENERAL POWERS AND DUTIES OF PUBLIC HEALTH SERVICE

* * * * * * *

Part J—Injury Control

RESEARCH

Sec. 391. (a) The Secretary, through the Director of the Centers for Disease Control, shall—

(1) conduct, and give assistance to public and nonprofit private entities, scientific institutions, and individuals engaged in the conduct of, research relating to the causes, mechanisms, prevention, diagnosis, treatment of injuries, and rehabilitation from injuries; and

(2) make grants to public and nonprofit private entities (including academic institutions, hospitals, and laboratories) and individuals for the conduct of such research.

(b) The Secretary, through the Director of the Centers for Disease Control, shall collect and disseminate, through publications and other appropriate means, information concerning the practical applications of research conducted or assisted under subsection (a).

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(1) enter into agreements between the Service and public and private community health agencies which provide for cooperative planning of activities to deal with problems relating to injuries and injury control; and

(2) work in cooperation with Federal, State, and local agencies to promote injury control.

STUDY

SEC. 393. By January 1, 1989, the Secretary through the Director of the Centers for Disease Control, shall prepare and transmit to the Congress a report analyzing the incidence and causes of childhood injuries in the United States and containing recommendations for such legislation with respect to injury control as the Secretary considers appropriate.

AUTHORIZATIONS OF APPROPRIATIONS

SEC. 394. (a) To carry out sections 391 and 392, there are authorized to be appropriated $10,000,000 for each of the fiscal years 1988, 1989, and 1990. Of the amounts appropriated under this section for any fiscal year, not more than 20 percent may be used for Federal administrative expenses to carry out such section for such fiscal year.

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